Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 1 of 70

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
, ,		
Northern District of: Illinois (State)		
Case number (if known)	Chapter you are filing under:	
	✓ Chapter 7	
	Chapter 11	
	Chapter 12	Check
	Chapter 13	amend

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Brandi First name	First name
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport	Middle name Henry Last name	Middle name Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the	First name	First name
	last 8 years	Middle acces	Middle
	Include your married or	Middle name	Middle name
	maiden names.	Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your	XXX - XX- 4550	xxx - xx-
	Social Security number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 2 of 70

0	ebtor 1 Brandi First Name	Middle Name Last Name	Case number (if known)
	T Hot Hamo	Windle Hallie East Hallie	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the	Business name	Business name
	last 8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live	40000 Q . 41.15	If Debtor 2 lives at a different address:
		12203 South Vincennes Road, Apt H21 Number Street	Number Street
			_
		Blue Island Illinois 60406 City State Zip Code	City State Zip Code
		Cook County	County
		If your mailing address is different from the one abov fill it in here. Note that the court will send any notices to you this mailing address.	
		Number Street	Number Street
			City State Zip Code
_		City State Zip Code	
6.	Why you are choosing this	Check one:	Check one:
	district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 140	8.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)
			_
			_

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 3 of 70

Debtor 1	Brandi	A Colollo Allono	Henry		Case number (if know	vn)	
Part 2:	First Name Tell the Court About	Middle Name					
7. The Ban you	chapter of the kruptcy Code are choosing to under	Check one. (For a b	rief description of each, see <i>Noti</i> the top of page 1 and check the a		-	(b) for Individuals	s Filing for Bankruptcy (Form
8. How	you will pay ee	court for more may pay with on your behalf of your	e entire fee when I file me details about how you not cash, cashier's check, oalf, your attorney may pay by the fee in installments of Pay Your Filing Fee in Installments at my fee be waived (You ge may, but is not require 10% of the official poverty I stallments). If you choose ting Fee Waived (Official Formal Part of the Waived (Official Formal Part of the Stallments).	nay pay. To remoney of with a creed. If you che stallments (a may requed to, waive ine that apthis option	rypically, if you rder If your a dit card or checoose this option Official Form 1 est this option e your fee, and oplies to your fan, you must fill	are paying the ttorney is subset with a pre-part, sign and at 03A). only if you are may do so of amily size and out the Application.	ne fee yourself, you omitting your payment orinted address. tach the <i>Application for</i> e filing for Chapter 7. nly if your income is a you are unable to pay
banl	e you filed for kruptcy within ast 8 years?	No. Yes. District District District	Northern District of Illinois	When When When	6/15/2016 MM / DD / YYYY MM / DD / YYYY	Case number _ Case number _ Case number _	16-19664
case bein spor filin you, busi	any bankruptcy es pending or g filed by a use who is not g this case with or by a ness partner, or n affiliate?	✓ No. Yes. Debtor District Debtor District		When When	MM / DD / YYYY MM / DD / YYYY	Relationship to Case number, if Relationship to Case number, if	known you
-	ou rent your dence?	✓ No.	12. landlord obtained an eviction judg Go to line 12. Fill out <i>Initial Statement About ai</i> this bankruptcy petition.				

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 4 of 70

Debtor 1 Brandi First Name		Midd		Henry Last Name	Case number (if kn	own)	
	y Bus		es You Own as a S				
12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		No. Yes.	Single Asset Re Stockbroker (as	Street box to describe you siness (as defined in all Estate (as defined defined in 11 U.S.C. ker (as defined in 11	n 11 U.S.C. § 101(27A)) d in 11 U.S.C. § 101(51B) § 101(53A))	Zip Code	
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	dead opera	llines. If y ations, ca C. § 11 1 No.	ou indicate that you are a ash-flow statement, and a 6(1)(B). I am not filing under Ch I am filing under Chapt Bankruptcy Code.	a small business deb federal income tax re napter 11. eer 11, but I am NOT	ether you are a small busitor, you must attach your return or if any of these doc a small business debtor a	most recent balance numents do not exist according to the defi	e sheet, statement of ht, follow the procedure in 11 finition in the
Part 4: Report if You Ow	n or	Have A	Any Hazardous Pro	operty or Any P	roperty That Needs	s Immediate At	tention
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate			What is the hazard? If immediate attention is r Where is the property?	needed, why is it nee	ded? Street		
attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	State		Zip Code

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 5 of 70

Brandi Henry Case number (if known)

Debtor 1 First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for

I am not required to receive a briefing about credit counseling because of:

cause and is limited to a maximum of 15 days.

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

cause and is limited to a maximum of 15 days.

counseling because of:

Incapacity.

Disability.

Active duty.

I am not required to receive a briefing about credit

about finances.

to do so.

If you believe you are not required to receive a briefing

I have a mental illness or a mental

deficiency that makes me incapable of

realizing or making rational decisions

My physical disability causes me to be

unable to participate in a briefing in

internet, even after I reasonably tried

I am currently on active military duty in

person, by phone, or through the

a military combat zone.

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 6 of 70

		known)		
16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts.				
Yes. I am filing under Chapter 7. Do	o you estimate that after any exempt proper	rty is excluded and administrative expenses are		
✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000		
✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
and correct. If I have chosen to file under Cl 11,12, or 13 of title 11, United S choose to proceed under Chapte If no attorney represents me an me fill out this document, I have I request relief in accordance w I understand making a false sta connection with a bankruptcy ca years, or both. 18 U.S.C. §§ 15 /s/ Brandi Henry Signature of Debtor 1	hapter 7, I am aware that I may p States Code. I understand the relie er 7. Ind I did not pay or agree to pay so e obtained and read the notice redith the chapter of title 11, United Stement, concealing property, or o ase can result in fines up to \$250, 2, 1341, 1519, and 3571.	roceed, if eligible, under Chapter 7, ef available under each chapter, and I omeone who is not an attorney to help quired by 11 U.S.C. § 342(b). States Code, specified in this petition. btaining money or property by fraud in		
	### Estions for Reporting Purposes 16a. Are your debts primarily 101(8) as "incurred by an No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily obtain money for a busine investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts your debts	estions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer de. 101(8) as "incurred by an individual primarily for a personal No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debt obtain money for a business or investment or through the o investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer deb No. I am not filing under Chapter 7. Go to line 18. Yes. I am filing under Chapter 7. Do you estimate that after any exempt prope paid that funds will be available to distribute to unsecured creditors? No. Yes. 1-49 1,000-5,000 50-99 50-99 50-99 10,001-\$100,001-\$500,000 \$50,001-\$100,001 \$50,001-\$100,001 \$50,001-\$100,001 \$500,001-\$1 million \$100,001-\$500 million \$500,001-\$1 million \$100,001-\$500 million \$100,001-\$500,000 \$1,000,001-\$500 million \$500,001-\$1 million 1 have examined this petition, and I declare under penalty of perjand correct. If I have chosen to file under Chapter 7, I am aware that I may performed in the person of the consent of the under Chapter 7. I am aware that I may performed in the chapter 7 are the chose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay so me fill out this document, I have obtained and read the notice recent of the consent of the under Chapter 7. If no attorney represents me and I did not pay or agree to pay so me fill out this document, I have obtained and read the notice recent request relief in accordance with the chapter of title 11, United States Code. I understand the relief choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay so me fill out this document, I have obtained and read the notice recent request relief in accordance with the chapter of title 11, United States Code. I understand the relief or accordance with the chapter of title 11, United States code. I understand making a false statement, concealing property, or occurred		

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 7 of 70

Debtor 1 Brandi		Henry	Case number (if	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one If you are not represented by an attorney, you do not	eligibility to proceed un the relief available und to the debtor(s) the no	nder Chapter 7, 11, 1 der each chapter for tice required by 11 U	2, or 13 of title 11, Ur which the person is e .S.C. § 342(b) and, in	at I have informed the debtor(s) about nited States Code, and have explained ligible. I also certify that I have delivered a case in which § 707(b)(4)(D) applies, ation in the schedules filed with the
need to file this page.	/s/ Amy Gerstein Signature of Attorney Amy Gerstein Printed name Semrad Law Firm Firm name	for Debtor	Date _	11/22/2016 MM / DD / YYYY
	11101 S. Western Ave Street	enue		
	Chicago		Illinois	60643
	City		State	Zip Code
	Contact phone	3128374023	Email address	agerstein@semradlaw.com
			Illinoi	s
	Bar number		State	

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 8 of 70

Fill in this information to identify your case:						
Debtor 1	Brandi		Henry			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing	g) First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case number (If known)			(State)			

Check if this is ar
amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$14,661.00
1c. Copy line 63, Total of all property on Schedule A/B	\$14,661.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$10,136.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$33,233.46
Your total liabilities	\$43,369.46
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,939.17
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$1,955.00

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 9 of 70

De	ebtor 1 Brandi		e number (if known)							
	First Name Middle Name	Last Name								
Par	t 4: Answer These Questions for Admi	nistrative and Statistical Records								
6. /	Are you filing for bankruptcy under Chapters 7, 1	1, or 13?								
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.									
	✓ Yes.									
7. \	What kind of debt do you have?									
	Your debts are primarily consumer debts. C family, or household purpose. 11 U.S.C. § 101(8	onsumer debts are those incurred by an individual). Fill out lines 8-10 for statistical purposes. 28 U								
	Your debts are not primarily consumer debt this form to the court with your other schedules.	ts. You have nothing to report on this part of the fo	orm. Check this box and subm	it						
8.	From the Statement of Your Current Monthly II. Form 122A-1 Line 11; OR, Form 122B Line 11; OR,		from Official	\$1,256.67						
9.	Copy the following special categories of claim	ns from Part 4, line 6 of Schedule E/F:								
	From Part 4 on Schedule E/F, copy the following	ng:	Total claim							
	9a. Domestic support obligations (Copy line 6a.)		\$0.00							
	9b. Taxes and certain other debts you owe the gove	emment. (Copy line 6b.)	\$0.00							
	9c. Claims for death or personal injury while you w	ere intoxicated. (Copy line 6c.)	\$0.00							
	9d. Student loans. (Copy line 6f.)									
	9e. Obligations arising out of a separation agreement	\$0.00								
	priority claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and ot	ther similar debts. (Copy line 6h.)	\$0.00							
	9a. Total . Add lines 9a through 9f.	, ., ,	\$19 595 00							

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 10 of 70

Fill in this	information to identify your cas	se:					
Debtor 1	Brandi			Henry			
.	First Name	Middle N	lame	Last Name			
Debtor 2 (Spouse, i	f filing) First Name	Middle N	lame	Last Name			
United Sta	ates Bankruptcy Court for the:	Northern		District of Illinois (State)			
Case num (If known)	nber			, ,	.		_
	al Form 106A/B					1	Check if this is an amended filing
Sche	dule A/B: Prope	erty					12/1
category v responsib write your	where you think it fits best. Be for supplying correct info name and case number (if k	se as complete and rmation. If more s nown). Answer eve	d accurate pace is n ery quest	only once. If an asset fits in me as possible. If two married peeded, attach a separate sheeton. r Other Real Estate You	eople are f et to this fo	illing together, both are e orm. On the top of any a	equally
1. Do you	own or have any legal or ed No. Go to Part 2	quitable interest in	any resid	dence, building, land, or simila	r property	?	
1.1	Yes. Where is the property? Street address, if available, or the street street street. Number Street City State	zip Code	Singl Dupl Cond Mani Land Inves Time Othe Who ha one. Debt Debt At lea Other in	stment property eshare	Check	Current value of the entire property? Describe the nature of interest (such as fee sit the entireties, or a life of the contractions). Check if this is con (see instructions).	d claims on Schedule D: ims Secured by Property. Current value of the portion you own? your ownership mple, tenancy by estate), if known.
If you o	Street address, if available, or Number Street City State		Singl Dupl Conc Manu Land Inves Time Othe	stment property eshare		Current value of the entire property? Describe the nature of interest (such as fee sit the entireties, or a life of the check if this is contact.	d claims on Schedule D: ims Secured by Property. Current value of the portion you own? your ownership mple, tenancy by estate), if known.
			one. Debt Debt Debt At lea	or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and another formation you wish to add ab	er	(see instructions)	

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 11 of 70

Debtor 1	Brandi First Name	Middle Name	Henry Last Name	Case number	(if known)	
1.3 Stre	et address, if available, or ot		What is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	oly.	Do not deduct secured of the amount of any secure Creditors Who Have Clat Current value of the entire property?	· ·
Nun	nber Street State	Zip Code	Land Investment property Timeshare Other		Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
]]]	Who has an interest in the property? Color Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add abo		Check if this is con (see instructions)	mmunity property
		tion you own for a	property identification number: Ill of your entries from Part 1, including e			
Do you o vyou own th	at someone else drives. If you nns, trucks, tractors, sport util	equitable interest i u lease a vehicle, als	n any vehicles, whether they are regist so report it on Schedule G: Executory Cont vcles			
	Make Model: Year:	Mazda Mazda6 2012	Who has an interest in the propert one. Debtor 1 only	ry? Check		laims or exemptions. Put ed claims on Schedule D: nims Secured by Property.
	Approximate mileage: Other information:	75000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this is community projections		Current value of the entire property? \$9325.00	Current value of the portion you own? \$9325.00
3.2	Make Model: Year: Approximate mileage:	Mitsubishi Galant 2003 121000	instructions) Who has an interest in the propert one. Debtor 1 only Debtor 2 only		•	ed claims on Schedule D: aims Secured by Property. Current value of the
	Other information:		Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this is community propinstructions)		entire property? \$1475.00	portion you own? \$1475.00

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 12 of 70

tor 1	Brandi	Henry	Case number (if known)		
	First Name	Middle Name Last Name			
3.3	Make Model: Year:	Who has an interest in the pone.	the amount of	of any secure	laims or exemptions. Pued claims on <i>Schedule Laims Secured by Prope</i>
	Approximate mileage: Other information:	Debtor 2 only Debtor 1 and Debtor 2 only	• •		Current value of the portion you own?
		At least one of the debtors a Check if this is commun instructions)			
3.4	Make Model: Year:	Who has an interest in the pone.	the amount of	of any secure	laims or exemptions. Po ed claims on <i>Schedule l</i> aims Secured by Prope
	Approximate mileage: Other information:	Debtor 2 only Debtor 1 and Debtor 2 only	Current val		Current value of th portion you own?
		At least one of the debtors a Check if this is commun instructions)			
Exar	mples: Boats, trailers, motors, pers	ATVs and other recreational vehicles, other vesonal watercraft, fishing vessels, snowmobiles, m			
Exar	mples: Boats, trailers, motors, pers No Yes Make Model:	who has an interest in the p	otorcycle accessories oroperty? Check Do not dedu the amount of	of any secure	ed claims on Schedule
Exar	mples: Boats, trailers, motors, pers No Yes Make	sonal watercraft, fishing vessels, snowmobiles, m Who has an interest in the p	property? Check Do not dedu the amount of Creditors W Current val entire proper	of any secure Tho Have Cla Iue of the	ed claims on <i>Schedule</i> a aims Secured by Prope
Exar 4.1	mples: Boats, trailers, motors, personal persona	Who has an interest in the pone. Debtor 1 only Debtor 2 only At least one of the debtors a instructions)	property? Check Do not deduthe amount of Creditors W Current valentire property (see	of any secure tho Have Cla lue of the erty?	ed claims on Schedule aims Secured by Prope Current value of th portion you own?
Exar	mples: Boats, trailers, motors, personal persona	Who has an interest in the pone. Debtor 1 only Debtor 2 only At least one of the debtors a Check if this is commun	property? Check Do not deduthe amount of Creditors W Current valuentire property (see property? Check Do not deduthe amount of Creditors W Current valuentire property of Current valuentire property (see	of any secure tho Have Cla lue of the erty? ct secured co of any secure	ed claims on Schedule aims Secured by Prope Current value of the portion you own? claims or exemptions. Ped claims on Schedule
Exar	mples: Boats, trailers, motors, personal persona	Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is commun instructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only	property? Check Do not deduthe amount of Creditors W Current valentire property? Check Do not deduthe amount of Creditors W Current valentire property? Check Current valentire property was a constant of Creditors W Current valentire property	of any secure tho Have Cla lue of the erty?	ed claims on Schedule aims Secured by Properation you own? Current value of the portion you own? claims or exemptions. Pred claims on Schedule aims Secured by Properations.
Exar 4.1	mples: Boats, trailers, motors, personal persona	Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is commun instructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only	property? Check Do not deduthe amount of Creditors W. Current valuentire property (see property? Check Do not deduthe amount of Creditors W. Current valuentire property (see Current valuentire property valuentire valuentire property valuentire	of any secure tho Have Cla lue of the erty?	claims or exemptions. Poed claims on Schedule laims Secured by Prope Current value of the

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 13 of 70

D	ebtor 1			Henry	Case number (if known)	
		First Name	Middle Name	Last Name		
			our Personal and Househol		ollowing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
			s and furnishings bliances, furniture, linens, china, kitcher	ware		
<u>_</u>	:	escribe	Misc. Household Furniture & Goods			\$500.00
	7. Electi Examp		s and radios; audio, video, stereo, and	digital equipment; computer	s, printers, scanners; music	
✓	Yes. D	escribe	Misc. Electronics			\$150.00
	Examp		lue and figurines; paintings, prints, or other oin, or baseball card collections; other o		•	
	Yes. D	escribe				
	Examp No	les: Sports, pl	orts and hobbies notographic, exercise, and other hobby ss; carpentry tools; musical instruments	equipment; bicycles, pool tal	bles, golf clubs, skis; canoes	
	No		les, shotguns, ammunition, and related	equipment		7
	1. Clot	hes	clothes, furs, leather coats, designer w	ear, shoes, accessories		
<u>_</u>	:	escribe	Used Clothing			\$250.00
	I 2. Jewe Exampi	•	ewelry, costume jewelry, engagement r er	ings, wedding rings, heirloor	m jewelry, watches, gems,	
✓	Yes. D	escribe	Misc. Jewelry			\$50.00
	Examp No	-farm anima les: Dogs, car Describe	is s, birds, horses			
	_	other persor	nal and household items you did no	t already list, including an	y health aids you did not list	
	No Yes. C	escribe]
			llue of all of your entries from Part 3			\$950.00

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 14 of 70

Den	Time Name	Middle Name	Leet Name	Case number (# known)	
Part	First Name Pescribe Your	Financial Assets	Last Name		
		any legal or equitable int	terest in any of the follo	wing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	☐ No	e in your wallet, in your home, in a		nen you file your petition	t26.00
				Cash:	\$36.00
17.	Examples: Checking, sa	avings, or other financial accounts stitutions. If you have multiple acc		n credit unions, brokerage houses, st each.	
	✓ Yes		Institution name:		
		17.1. Checking account:	Fifth Third		\$60.00
		17.2. Checking account:			
		17.3. Savings account:	Fifth Third		\$0.00
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:	-		
		17.9. Other financial account:	-		-
18.		, or publicly traded stocks investment accounts with brokerag	ge firms, money market accounts		
	✓ No		,		
	Yes	Institution or issuer name:			
19.	Non-publicly traded s an LLC, partnership,		ated and unincorporated busi	nesses, including an interest in	
	✓ No	Name of entity		% of ownership:	
	Yes. Give specific information about	marile of entity		% of ownership.	
	them				

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 15 of 70

Deb	tor 1	Brandi		Henry	Case number (if known)	
		First Name	Middle Name	Last Name		
20.			orate bonds and other negotiab			
			nclude personal checks, cashiers' c			
	Nor	n-negotiable instrume	nts are those you cannot transfer to	someone by signing or deliverin	g them.	
	\checkmark	No				
	П	Yes. Give specific				
	ш	information about	Issuer name:			
		them				
21.		tirement or pension				
			A, ERISA, Keogh, 401(k), 403(b),	thrift savings accounts, or other p	pension or profit-snaring plans	
	⊻	No	Time of account	In a titution or a second		
		Yes. List each	Type of account:	Institution name:		
		account	401(k) or similar plan:			
		separately.	Pension plan:			
			IRA:			
			Retirement account:			
			Keogh:			
			Additional account:			
			Additional account:			
	_					
22.		curity deposits and p	prepayments deposits you have made so that you	may continue con ico or use from	a company	
	Exa	amples: Agreements v	with landlords, prepaid rent, public	utilities (electric. gas. water), tele	communications	
		npanies, or others		, , , , , , , , , , , , , , , , , , ,		
	V	No		Institution name:		
	П	Yes				
	ш	165	Electric:			
			Gas:			
			Heating oil:			
			Security deposit on rental unit:			
			Prepaid rent:			
			Telephone:			
			Water:			
			Rented furniture:			
			Other:			
23.	Anı	nuities (A contract for	a periodic payment of money to yo	ou, either for life or for a number of	f years)	
	V	No				
	F		Issuer name and description:			
	Ш	Yes				

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 16 of 70

Debt	or 1 Brandi First Name	Middl	Henry e Name Last Name	Case number (if known)	
24.	Interests in a	n education IRA, in an ac	count in a qualified ABLE program, or	under a qualified state tuition program	l.
	_	530(b)(1), 529A(b), and 529	(b)(1).		
	✓ No Yes	Institution name and descri	ption. Separately file the records of any inte	rests.11 U.S.C. § 521(c):	
25.		able or future interests in or your benefit	property (other than anything listed in	line 1), and rights or powers	
	✓ No				_
	Yes. Desc	cribe			
26.			secrets, and other intellectual property		
	✓ No	,		,	
	Yes. Desc	cribe			
27	Liconece fra	nchises, and other genera	al intangible		_
27.			nses, cooperative association holdings, liq	uor licenses, professional licenses	
	✓ No				
	Yes. Desc	cribe			
Moi	ney or prope	erty owed to you?			Current value of the portion you own? Do not deduct secured
28.	Tax refunds o	wed to vou			claims or exemptions.
	□ No	•			
	Yes. Give	specific information	Anticipated 2016 Tax Refund	Federal:	\$2815.00
	you a	It them, including whether already filed the returns		State:	\$0.00
		he tax years		Local:	\$0.00
29.	Family suppo Examples: Past		pousal support, child support, maintenance	divorce settlement, property settlement	
	✓ No				
	Yes. Give	specific information		Alimony:	\$0.00
				Maintenance:	\$0.00
				Support:	\$0.00
				Divorce settlement:	\$0.00
00	0.1			Property settlement:	\$0.00
30.	Examples: Unp		ce payments, disability benefits, sick pay, va loans you made to someone else	acation pay, workers' compensation,	
	✓ No				
	Yes. Desc	ribe			

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 17 of 70

Deb	tor 1 Brandi	Henry	Case number (if known)	
	First Name Middle Name	e Last Name		_
31.	Interests in insurance policies Examples: Health, disability, or life insurance; he	ealth savings account (HSA); credit, ho	meowner's, or renter's insurance	
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from If you are the beneficiary of a living trust, expect property because someone has died.		r are currently entitled to receive	
	✓ No Yes. Describe			
33.	Claims against third parties, whether or not Examples: Accidents, employment disputes, insu		lemand for payment	
	✓ No Yes. Describe			
34.	Other contingent and unliquidated claims of to set off claims	of every nature, including countercl	aims of the debtor and rights	
	✓ No Yes. Describe			
35.	Any financial assets you did not already list			
	✓ No Yes. Describe			
36.	Add the dollar value of all of your entries fro for Part 4. Write that number here			\$2911.00
		.		
Part			n Interest In. List any real estate i	n Part 1.
37.	Do you own or have any legal or equitable in	nterest in any business-related prop	· ·	
	No. Go to Part 6. Yes. Go to line 38.		pc Do	urrent value of the ortion you own? on the deduct secured claims exemptions
38.	Accounts receivable or commissions you alm	eady earned		·
	Yes. Describe			
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software		ines, rugs, telephones, desks, chairs, electror	nic devices
	✓ No Yes. Describe			

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 18 of 70

Deb	tor 1 Brandi	No. 15 and	Henry	Case number (if known)	
40.	First Name Machinery, fixtures, ed	Middle Name quipment, supplies you use in bus	Last Name siness, and tools of your trade	e	
.5.	No	Tarking and his page 12 and 11 page	solo oi your iraut	-	
	Yes. Describe				
41	Inventory				
	₩ No				
	Yes. Describe				
	Too. December				
12	Interests in partnersh	nine or joint ventures			
42.	No No	iips or joint ventures			
		Name of e	entity:	% of ownership:	
	Yes. Give specific information about				
	them				
43 (Customer lists, mailing	lists, or other compilations			
.0.	No	,, or ourse complianous			
		nclude personally identifiable informat	ion (as defined in 11 U.S.C. & 10	01(41A))?	
		isiaas personany rasminazio imermat	(ao aooa	· (· · · · · //) ·	
	∐ No	with a			
	Yes. Desc	inde			
44.	Any business-related	property you did not already list			
	✓ No				
	Yes. Give specific				_
	information				
		all of your entries from Part 5, inclured the second series in the serie			
Par		Farm- and Commercial Fish n interest in farmland, list it in Part 1.	ing-kelated Property Yo	ou Own or Have an Interest In.	
46.	Do you own or have a	any legal or equitable interest in ar	ny farm- or commercial fishing	g-related property?	
	✓ No. Go to Part 7.				Current value of the
	Yes. Go to line 47.				portion you own? Do not deduct secured
	_				claims
17	Farm animals				or exemptions
41.	Examples: Livestock, po	oultry, farm-raised fish			
	✓ No				
	Yes. Describe				
	<u> </u>				

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 19 of 70

Debt	or 1	Brandi	Medalla Nassa	Henry	Case number (if known)	
40	C=-	First Name	Middle Name	Last Name		
48.	_	pps-either growing or h	iarvested			
		No				
	Ш	Yes. Describe				
49.	Far	m and fishing equipme	ent, implements, machinery, fixto	ures, and tools of trade		
	V	No				
		Yes. Describe				
	_					
50.	Far	m and fishing supplies	chemicals and feed			
50.	_		, chemicais, and reed			
		No Yes. Describe				
	ш	res. Describe				
51.	Any	/ farm- and commercia	I fishing-related property you did	I not already list		
	✓	No				
		Yes. Describe				
- A	-1 -1 41	a delle under et ell et	particle from Dort C in alredi	f f	bassa attaabad	
			your entries from Part 6, includi e			
					L	
Part	7.	Describe All Prone	erty You Own or Have an I	nterest in That You F	Old Not List Above	
			y of any kind you did not already		THE ROLL LIST ABOVE	
		mples: Season tickets, co		,		
	✓	No				
		Yes. Give specific				
		information				
54. A	dd th	ne dollar value of all of	your entries from Part 7. Write th	nat number here		
Part	8:	List the Totals of I	Each Part of this Form			
55 C	ort '	1: Total roal octato lino	2			
JJ. F	art	i. Total real estate, line	Z			
56. p	art 2	2 total vehicles, line 5		\$10800.00		
57. P	art 3	: Total personal and he	ousehold items, line 15	-		
		-		\$950.00		
		: Total financial assets		\$2911.00		
59. F	art !	5: Total business-relate	ed property, line 45			
60. F	art (6: Total farm- and fishi	ng-related property, line 52			
61. F	art 7	7: Total other property	not listed, line 54		•	
			I lines 56 through 61			
UZ. I	otal	personal property. Add	i iii ies 50 ii ii 0uyi i 61	\$14661.00	Copy personal property total	+ \$14661.00
				1		
62 T	otal	of all proporty on Cal-	dulo A/R Add line EE + line 60			\$14661.00
UJ. 1	Jidi	or an property on some	dule A/B. Add line 55 + line 62			

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 20 of 70

Fill in this information to identify your case:					
Debtor 1	Brandi		Henry		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filin	g) First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	Northern	District of Illinois		
(State)					
(If known)					

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t 1: Identify the Property You Cla	im as Exempt				
1. 2.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) To vou are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption		
	Brief description: Fifth Third Line from Schedule A/B: 17	\$60.00	\$60.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
	Brief description: Fifth Third Line from Schedule A/B: 17	\$0.00	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every) No Yes. Did you acquire the property covered No Yes	3 years after that for ca				

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 21 of 70

Debtor 1 Brandi Henry Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$500.00 **✓** description: \$500.00 Misc. Household 100% of fair market value, up to any **Furniture & Goods** applicable statutory limit Line from 06 Schedule A/B: Brief 735 ILCS 5/12-1001(a) \$250.00 **✓** description: \$250.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 Brief 735 ILCS 5/12-1001(b) \$150.00 **✓** description: \$150.00 Misc. Electronics 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 07 Brief 735 ILCS 5/12-1001(b) \$50.00 **✓** description: \$50.00 Misc. Jewelry 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 12 Brief 735 ILCS 5/12-1001(b) \$36.00 **/** description: \$36.00 Cash on Hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 735 ILCS 5/12-1001(b) \$2,815.00 **✓** description: \$2,815.00 **Anticipated 2016 Tax** 100% of fair market value, up to any Refund applicable statutory limit Line from Schedule A/B: 28 Brief 735 ILCS 5/12-1001(c) \$1,475.00 **✓** description: \$1,475.00 Mitsubishi Galant, 2003 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 03

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 22 of 70

Debtor 1 Brandi Henry First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number (Iknown) Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/1 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and ease number (Iknown). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. 2. List all secured Claims 2. List all secured Claims. If a creditor has more than one secured claim, list the other creditors in Part 2. As mount of claim one creditor has a particular claim, list the other creditors in Part 2. As mount of claim Do not deduct the value of collateral, which is the state of the date to you file, the claim is: Check all that apply. 2. CONSUMER PORTFOLIO SVC Configerts Name PO BOX 57971 Number Street PO BOX 57971 Number Street Who owes the debt? Check or Indige and the control of the count of the count of the count and survey. Debtor 1 and Debtor 2 only Liniquidated Disputed Meter of line, Check all that apply. All and a community debt Debtor 1 and Debtor 2 only Liniquidated Disputed Meter of line, Check all that apply. All and a community debt Debtor 1 and Debtor 2 only Liniquidated Disputed Meter of line, Check all that apply. Debtor 1 and Debtor 2 only Liniquidated Disputed Meter of line, Check all that apply. Debtor 1 and Debtor 2 only Liniquidated Disputed Meter of line, Check all that apply. Debtor 1 and Debtor 2 only Liniquidated Disputed Meter of line, Check all that apply. Debtor 1 and Debtor 2 only Liniquidated							
Debtor 2 (Spouse, if filling) First Name Middle Name Last Name	Fill in thi	s information to identify your case	:				
Debtor 2 Spouse, if filling) First Name Middle Name Last Name	Debtor 1	1 Brandi		Henry			
United States Bankruptcy Court for the: Northern District of Illinois		First Name	Middle Name	, and the second			
United States Bankruptcy Court for the: Northern District of Illinois (State) Official Form 106D Check if this is a amended filling Schedule D: Creditors Who Have Claims Secured by Property 12/1 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Part 1							
Case number (If known) Check if this is a amended filing Schedule D: Creditors Who Have Claims Secured by Property 12/1 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).	(Spouse	, if filing) First Name	Middle Name	Last Name			
Case number ((If known)	United S	States Bankruptcy Court for the:	Northern	District of Illinois			
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/1 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. 2. List all secured Claims. If a creditor has more than one secured claim, list the other creditor's name. 2. List all secured claims in alphabetical order according to the creditor's name. 2. List all secured claims. If more than one creditor has a particular claim, list the other creditor's name. 2. List all secured claims in alphabetical order according to the creditor's name. 2. List all secured claims. If more than one creditor has nore than one secured claim, list the other creditor's name. 2. List all secured claims. If a creditor has more than one secured claim, list the other creditor's name. 2. List all secured claims. If a creditor has more than one creditor has a particular claim, list the other creditor's name. 2. List all secured claims. If a creditor has more than one creditor has na particular claim, list the other creditor's name. 2. List all secured claims. If a creditor has more than one creditor has na particular claim, list the other creditor's name. 2. List all secured claims. If a creditor has more than one creditor has na particular claim, list the characteristic claim claim has a passible, list the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file he claim is: Check all that apply. As o	Casa nu	ımhar		(State)			
Schedule D: Creditors Who Have Claims Secured by Property 12/1 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured Claims in alphabetical order according to the creditor's name. Part 1: List All Secured Claims in alphabetical order according to the creditor's name. Po Box 57071 Number Street Consumer Po Box 57071 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Carl long) Debtor 1 and Debtor 2 only An agreement you made (such as mortgage or secured car long) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Cother (including a right to offset) Last 4 digits of account number 5564 Last 4 digits of account number Last 4 digits of ac							
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List all Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the other creditors in Part 2. As mount of claim to not deduct the value of collateral, this claim is alphabetical order according to the creditor's name. 2. List all secured claims. If a creditor has a particular claim, list the other creditor's name. 2. List all secured claims in alphabetical order according to the creditor's name. 2. Consumer or deduct the value of collateral, that supports this claim is claim. If any this property that secures the claim: 2. Consumer Portion or the deduct the property that secures the claim: Storet Portion that supports that supports that supports that supports that claim. As of the date you file, the claim is: Check all that apply. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt another. Check if this claim relates to a community debt another. Date debt was 2/1/2016 Last 4 digits of account number 5564	Offic	ial Form 106D			I		
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List all Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the other creditors in Part 2. As mount of claim to not deduct the value of collateral, this claim is alphabetical order according to the creditor's name. 2. List all secured claims. If a creditor has a particular claim, list the other creditor's name. 2. List all secured claims in alphabetical order according to the creditor's name. 2. Consumer or deduct the value of collateral, that supports this claim is claim. If any this property that secures the claim: 2. Consumer Portion or the deduct the property that secures the claim: Storet Portion that supports that supports that supports that supports that claim. As of the date you file, the claim is: Check all that apply. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt another. Check if this claim relates to a community debt another. Date debt was 2/1/2016 Last 4 digits of account number 5564	Sch	edule D: Credit	ors Who Ha	ve Claims Secur	ed by Pro	perty	12/1
for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 CONSUMER PORTFOLIO SVC Creditor's Name PO BOX 57071 Number Street RVINE California 92619 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 and Debtor and another Under the claim is the other creditor's name. Amount of claim Do not deduct the value of collateral. that supports that supports that supports this claim Saltino Saltin	1. Do	any creditors have claims secu No. Check this box and submit the Yes. Fill in all of the information by	nis form to the court with yo	our other schedules. You have nothing	else to report on this f	orm.	
for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 CONSUMER PORTFOLIO SVC Creditor's Name PO BOX 57071 Number Street RVINE California 92619 Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 and Debtor 2 and another Debtor 1 including a right to offset) Date debt was 2/1/2016 Last 4 digits of account number 5564	2. Li	ist all secured claims. If a credito	r has more than one secu	red claim. list the creditor separately	Column A	Column B	Column C
Creditor's Name PO BOX 57071 Number Street RVINE California 92619 Contingent Unliquidated Disputed	fo	r each claim. If more than one cre	ditor has a particular claim	n, list the other creditors in Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports	Unsecured portion
Automobile Number Street RVINE California 92619 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was 2/1/2016 incurred Automobile As of the date you file, the claim is: Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Check if this claim relates to a community debt Last 4 digits of account number 5564			Describe the property	that secures the claim:	\$10,136.00	\$9,325.00	\$811.00
	IR GC C	Number Street EVINE California 92619 Ity State ZIP Code The owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt ate debt was 2/1/2016	As of the date you file. Contingent Unliquidated Disputed Nature of lien. Check a An agreement you rear loan) Statutory lien (such Judgment lien from Other (including a ri	all that apply. made (such as mortgage or secured as tax lien, mechanic's lien) a lawsuit ght to offset)			
	in				# 40.400.00		

number here:

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 23 of 70

Fill i	in this informa	ation to identify your cas	e:					
Deb	otor 1	Brandi		Henry	_			
		First Name	Middle Name	Last Name	_			
	otor 2 ouse, if filing)	First Name	Middle Name	Last Name	-			
Unit	ted States Ba	nkruptcy Court for the:	Northern	District of Illinois (State)	_			
	se number nown)				_			
`	,	orm 106E/F				Che	eck if this is ar	n amended filing
			ditoro Who	Hava Unasau	rad Claima			
JU	neau	ie E/F: Cre	cultors who	Have Unsecu	red Claims			12/15
party 106A that entri knov	/ to any exection / to any exection / to and on a care listed in es in the bown).	cutory contracts or une Schedule G: Executory Schedule D: Creditory xes on the left. Attach	expired leases that could by Contracts and Unexpire is Who Hold Claims Secure the Continuation Page to	rs with PRIORITY claims and result in a claim. Also list exect d Leases (Official Form 106G) red by Property. If more space o this page. On the top of any	cutory contracts on Sch . Do not include any cre e is needed, copy the Pa	edule A/B: editors with art you nee	Property (Of partially sec d, fill it out, n	fficial Form cured claims number the
Par	List A	II of Your PRIORIT	TY Unsecured Claims	<u> </u>				
1.		ditors have priority un to Part 2.	secured claims against yo	ou?				
2.	listed, identi much as po Continuatio	fy what type of claim it is ssible, list the claims in a n Page of Part 1. If more	 If a claim has both priority a alphabetical order according than one creditor holds a p 	ore than one priority unsecured and nonpriority amounts, list that to the creditor's name. If you ha particular claim, list the other credor this form in the instruction book	claim here and show both ve more than two priority ditors in Part 3.	n priority and	nonpriority ar	mounts. As
						Total	Priority	Nonpriority

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 24 of 70

Debto			
	First Name Middle Name Las	t Name	
Part 2	List All of Your NONPRIORITY Unsecured Claim	S	
3. I	Do any creditors have nonpriority unsecured claims against yo	u?	
i	No. You have nothing to report in this part. Submit this form to the		
i	✓ Yes.	o court man your outon contourion	
		I order of the creditor who holds each claim. If a creditor has more the	
	·	claim listed, identify what type of claim it is. Do not list claims already incors in Part 3.If you have more than four priority unsecured claims fill out the	
	n more than one creditor holds a particular claim, list the other credito Page of Part 2.	is in Part 3.ii you have more than lour priority unsecured daims iiii out ti	le Continuation
	ago of Fair 2.		Total alaim
	ATO ODEDIT		Total claim
4.1	ATG CREDIT Nonpriority Creditor's Name	- Last 4 digits of account number0279	\$211.00
	1700 W CORTLAND ST STE 2	When was the debt incurred? 3/1/2013	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	CHICAGO Illinois 60622	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	<u></u>	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this plaim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	✓ 001 Collection; Collecting for	
	No	ORIGINAL CREDITOR: SOUTH	
	☐ Yes	Other. Specify SUBURBAN COLLEGE	
4.2	CAPITAL ONE	- Last 4 digits of account number 9603	\$394.00
	Nonpriority Creditor's Name p.o. box 3001	When was the debt incurred? 2/1/2015	
	Number Street	When was the dept incurred:	
	c/o shraddha bharatia	As of the date you file, the claim is: Check all that apply.	
	Malvern Pennsylvania 19355	Contingent	
	Malvern Pennsylvania 19355 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	··	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	님		
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify CreditCard	
	✓ No		
	Yes		
4.3	City of Chicago Parking	- Last 4 digits of account number	\$8,262.39
	Nonpriority Creditor's Name 121 N. LaSalle St # 107A	When was the debt incurred?	
	Number Street	When was the dest incurred:	
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Chicago Illinois 60602	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	··	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	✓ Parking Tickets & Red Light	
	No	Other. Specify Violations	
	=		
	☐ Yes		

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 25 of 70

Debtor 1 Brandi Henry Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 Express Clothing \$300.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO Box 182273 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 43218 Columbus Ohio City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Credit Card Other. Specify_ Is the claim subject to offset? **✓** No Yes **NAVIENT SOLUTIONS INC** \$19,595.00 Last 4 digits of account number 0515 Nonpriority Creditor's Name 1002 ARTHUR DR When was the debt incurred? 5/1/2009 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated LYNN HAVEN Florida 32444 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ✓ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes PEOPLES ENGY \$1.897.32 Last 4 digits of account number 6239 Nonpriority Creditor's Name 200 EAST RANDOLPH When was the debt incurred? 10/1/2011 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **CHICAGO** Illinois 60601 City Zip Code State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ Gas Bill Is the claim subject to offset? **✓** No

Yes

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 26 of 70

Debtor 1 Brandi Henry Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 Sprint \$1,414.95 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 219554 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 64121 Kansas City Missouri City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Cell Phone Bill Other. Specify _ Is the claim subject to offset? **✓** No Yes SYNCB/OLD NAVY \$200.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 530942 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Atlanta Georgia 30353 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify _ Credit Card Is the claim subject to offset? **✓** No Yes TCF - Corporate \$300.00 Last 4 digits of account number _ Nonpriority Creditor's Name 1405 Xenium Ln N Ste 180 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 55441 Minneapolis Minnesota Zip Code Citv State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify ___ Bank NSF Fees Is the claim subject to offset? **✓** No Yes

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 27 of 70

Debtor		Henry Case number (if known)	
	First Name Middle Name	Last Name	
Part 2:	Your NONPRIORITY Unsecured Claims - C	Continuation Page	
	After listing any entries on this page, number them b	peginning with 4.5, followed by 4.6, and so forth.	Total claim
4.10	The Payday Loan Store Creditors Bankruptcy Service Nonpriority Creditor's Name P.O Box 740933 Number Street	Last 4 digits of account number When was the debt incurred?n/a	\$410.80
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Dallas Texas 75374	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	Other. Specify Payday Loan	
	<u>✓</u> No		
	Yes		
4.11	TMobile	Last 4 digits of account number	\$248.00
	Nonpriority Creditor's Name P.O. Box 742596	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	0	Unliquidated	
	CincinnatiOhio45274CityStateZip Code		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	<u> </u>	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts Call Phase Rill	
	Is the claim subject to offset?	✓ Other. Specify <u>Cell Phone Bill</u>	
	✓ No		

Yes

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 28 of 70

otor 1	Brandi			Henry	Case	number (if known)			
	First Name	Mic	ddle Name	Last Name					
3:	List Others	to Be Notified A	About a Debt	That You Already	Listed				
_				•					
Use	this nage only	if you have others	to be notified a	bout your bankrupto	v for a debt that v	ou already listed in Parts 1 or 2. For example, if a			
		•			•	original creditor in Parts 1 or 2, then list the collecti			
		, ,	•	•	,	d in Parts 1 or 2, list the additional creditors here. I			
_	•	• •		•	•	out or submit this page.			
, cu	40 1101 11410 40	aditional porcono t	0 00 110111104 101	any dobto in ranto	. c. 2, ac not iii c	at or outsime and page.			
Cor	nvergent Outsou	reina Inc							
Nan		ronig, mo.		On which en	On which entry in Part 1 or Part 2 did you list the original creditor?				
	Box 9004 umber Street								
Pol				Line 4.7	of (Check	Part 1: Creditors with Priority Unsecured Clain			
Nur					one):	Part 2: Creditors with Nonpriority Unsecured Claims			
	nton	Washington	98057	Last 4 digits	of account numb	er			
City	/	State	Zip Code						
ER	C/Enhanced Rec	covery Corp							
Nan	ne			On which en	ry in Part 1 or Par	t 2 did you list the original creditor?			
901	4 Poulborn / Pd			Line 4.11	of (Check	Part 1: Creditors with Priority Unsecured Claim			
_	14 Bayberry Rd				one):				
Nur	mber Street	per Street			one).	Part 2: Creditors with Nonpriority Unsecured			
						Claims			
Jac	ksonville	Florida	32256	Last 4 digits	of account numb	er			
City	/	State	Zip Code						

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 29 of 70

Brandi Debtor 1 Henry Case number (if known) First Name Middle Name Last Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$19,595.00 **Total claims** 6f. Student loans 6f. from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$13,638.46 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$33,233.46 6j. Total. Add lines 6f through 6i. 6 j.

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 30 of 70

Fill in this info	rmation to identify your cas	e:		
Debtor 1	Brandi		Henry	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing) First Name		Middle Name	Last Name	
United States	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number				
(If known)				

Official Form 106G

Check if this is an
amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company	y with whom you have t	he contract or lease	State what the contract or lease is for
2.1	Blue Station Apartment Name	nts		Residential Lease, Debtor is Lessee, Annual Lease
	12225 Vincennes Rd Number	Street		
	Blue Island City	Illinois State	60406 Zip Code	

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 31 of 70

Fill	in this inforr	nation to identify your cas	se:		
Del	otor 1	Brandi		Henry	
		First Name	Middle Name	Last Name	
	otor 2	7) =:			
(Sp	ouse, ii iiing	g) First Name	Middle Name	Last Name	
Uni	ted States E	Bankruptcy Court for the:	Northern	District of Illinois	
Cas	se number			(State)	
	nown)	-			—
					Check if this is an
		_			amended filing
Of	ficial l	Form 106H			
Sc	hedul	e H: Your C	ndehtors		12/15
					plete and accurate as possible. If two married people are filing
	Vithin the Idaho, Loui Ves. I	e last 8 years, have you siana, Nevada, New Mex Go to line 3. Did your spouse, former s No	lived in a community propico, Puerto Rico, Texas, War	shington, and Wisconsin.) we with you at the time?	ebtor.) nmunity property states and territories include Arizona, California, the name and current address of that person.
		Name of your spouse, f	ormer spouse, or legal equiv	valent valent	_
		Number Street			_
		City	State	Zip Code	_
3.	again as a	codebtor only if that p	erson is a guarantor or co	osigner. Make sure you have	ur spouse is filing with you. List the person shown in line 2 listed the creditor on <i>Schedule D</i> (Official Form 106D), e <i>D</i> , <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2.
	Column 1	: Your codebtor			Column 2: The creditor to whom you owe the debt

Official Form 106H Schedule H: Your Codebtors page 1

Check all schedules that apply:

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 32 of 70

Fill in this information to identi	fv vour case:		_			
	iy your odoo.	Honny				
Debtor 1 Brandi First Name	Middle Name	Henry Last Name	9	-		
Debtor 2					Check if this is:	
(Spouse, if filing) First Name	Middle Name	Last Name	Э	_	An amended filing	
United States Bankruptcy Court for the:	Northern	District of Illinoi (State		_	A supplement showing post-petition chap expenses as of the following date:	
Case number (If known)		(Olaic	•/	-	MM / DD / YYYY	
Official Form 106I						
Schedule I: Your Inc	come					
nclude information about you additional pages, write your n	ame and case number				eet to this form. On the top of any	
Fill in your employment		Debtor 1			Debtor 2	
information.	Employment status	✓ Employed			Employed Not Employed	
If you have more than one job,		Not Employed				
attach a separate page with	Occupation	Front Desk Cl				
information about additional employers.	Employer's name	Imperial Motel				
Include part time, seasonal,	Employer's address	45 W. 103rd Street Number Street				
or self-employed work.					Number Street	
Occupation may include student						
or homemaker, if it applies.		Chicago	Illinois	60628		
		City	State	Zip Code	City State Zip Code	
	How long employed there?	1 month				
you are separated. If you or your non-filing spouse have mattach a separate sheet to this form.	e date you file this form. If you	ine the information t	for all employe	ers for that perso	the space. Include your non-filing spouse unle on on the lines below. If you need more space, For Debtor 2 or non-filing spouse	
List monthly gross wages, sala deductions.) If not paid monthly, or				\$1,358.50		
3. Estimate and list monthly ove	rtime pay.	3.		+ \$0.00		

\$1,358.50

4. Calculate gross income. Add line 2 + line 3.

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 33 of 70

Denio	First Name		Last Name	Case number (t known)	
	First Name	Middle Name	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse	
Cop	y line 4 here		→ 4.	\$1,358.50		
5. List	all payroll deduc					
5a.	Tax, Medicare, a	nd Social Security deductions	5a	\$210.17		
5b.	Mandatory cont	ributions for retirement plans	5b	\$0.00		
5c.	Voluntary contri	butions for retirement plans	5c	\$0.00		
5d.	Required repayr	ments of retirement fund loans	5d	\$0.00		
5e.	Insurance		5e	\$0.00		
5f. l	Domestic suppo	rt obligations	5f.	\$0.00		
5g.	Union dues	-	5g.	\$0.00		
5h.	Other deduction	ns. Specify:	5h. +	\$0.00 +		
6. Add +5h.	l the payroll dedu	uctions. Add lines 5a + 5b + 5c + 5d + 5e +5f	+ 5g 6	\$210.17		
7. Cald	culate total mont	hly take-home pay. Subtract line 6 from line 4	l. 7	\$1,148.33		
8. List	all other income	regularly received:				
	business, profes	•	_			
		nt for each property and business showing gros and necessary business expenses, and the tota e.		\$0.00		
8b.	Interest and divi	idends	8b	\$0.00		
	Family support dependent regul	payments that you, a non-filing spouse, or larly receive	а			
		pousal support, child support, maintenance, t, and property settlement.	8c	\$0.00		
8d.	Unemployment	compensation	8d	\$0.00		
8e.	Social Security		8e	\$0.00		
 	Include cash assist assistance that you the Supplemental subsidies	nt assistance that you regularly receive tance and the value (if known) of any non-cash u receive, such as food stamps (benefits under Nutrition Assistance Program) or housing		to oo		
			8f	\$0.00		
Ū	Pension or retire		8g	\$0.00		
	-	ncome. Specify:	-	\$0.00 +		
9. Add	all other income	e Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8	8h. 9. <u> </u>	\$0.00		
		ncome. Add line 7 + line 9. e 10 for Debtor 1 and Debtor 2 or non-filing spo	10	\$1,148.33 +	=	\$1,148.33
Incl rela	lude contributions fatives.	lar contributions to the expenses that you from an unmarried partner, members of your ho nounts already included in lines 2-10 or amounts	ousehold, your deper	ndents, your roommates,		
Spe	ecify:				11.	+ \$0.00
		the last column of line 10 to the amount in the Summary of Schedules and Statistical Sum.				\$1,939.16
		•	-	,		Combined monthly income
13. Do	you expect an ir	ncrease or decrease within the year after yo	u file this form?			
Ë	Yes. Explain:					
L	J 103. Explail.					

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 34 of 70

Debtor 1	Brandi		Henry	Cas	se number (if known)		
	First Name	Middle Name	Last Name				
Part 1:	Describe Employme	nt					
		Debtor 1			Debtor 2		
Emplo	yment status	✓ Employed			Employed		
		Not Employed			Not Employed		
Occup	ation						
Employ	/er's name	Silver Oaks Investmen	nt Inc				
Employ	er's address	1413 W. 127th Street	, Suite A		Neverbas Office of		
		Number Street			Number Street		
		Riverdale	Illinois	60827	City	Ctata	7:n Code
		City	State	Zip Code	City	State	Zip Code
How lo	ng employed there?	10 months	_				

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 35 of 70

Debtor 1 Brandi			Henry	Case number (if known)				
	First Name	Middle Name	Last Name					
Part 2: Give Details About Monthly Income								
				For Debtor 1	For Debtor 2 or non-filing spouse			
8h.Other	monthly income. Specify:							
1. Silver	Oaks Investment Inc			\$790.83				

Official Form 106l Schedule I: Your Income page 4

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 36 of 70

Fill in this inforr	nation to identify y	our case:				
Debtor 1	Brandi		Honny			
Debior	First Name	Middle Name	Henry Last Name			
Debtor 2				Check if this is:		
(Spouse, if filing	First Name	Middle Name	Last Name	An amended filing		
United States E	Bankruptcy Court fo	or the: Northern	District of Illinois (State)	A supplement sho	owing post-petition of	chapter 13
Case number			(State)	expenses as or the	3 lollowing date.	
(If known)				MM / DD / YYYY		
Official	Form 106	3 I				
Schedu	le J: You	r Expenses				12/15
		s possible. If two married people are				
	more space is ne wer every questi	eeded, attach another sheet to this on.	form. On the top of any additiona	al pages, write your nar	ne and case num	iber
	cribe Your Ho					
1. Is this a joir		usenoiu				
	to line 2					
Yes. Do	oes Debtor 2 live	in a separate household?				
	No					
	Yes. Debtor 2 r	must file Official Forms 106J-2, Expen	ses for Separate Household of Debi	for 2.		
2. Do you hav dependents?	e	✓ No				
Do not list D Debtor 2.	ebtor 1 and	Yes. Fill out this information for	Dependent's relationship to	Dependent's	Does dependent live	
		each dependent	Debtor 1 or Debtor 2	age	with you?	
	penses include f people other	✓ No				
than		Yes				
yourself and dependents		_				
Part 2: Esti	mate Your Ong	going Monthly Expenses				
	of a date after the	your bankruptcy filing date unless e bankruptcy is filed. If this is a sup				
	•	n non-cash government assistance	•		Vaur	
		uded it on Schedule I: Your Income	,		four	expenses
 The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. 					4.	\$850.00
If not incl	uded in line 4:					
4a. Real estate taxes					4a	\$0.00
4b. Property, homeowner's, or renter's insurance					4b	\$0.00
4c. Home maintenance, repair, and upkeep expenses					4c	\$0.00
4d. Homeowner's association or condominium dues					4d.	\$0.00

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 37 of 70

Henry Debtor 1 Brandi Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$150.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$130.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$300.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services \$50.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$350.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$75.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 38 of 70

Debtor 1	Brandi		Henry	Case number (if known)		
	First Name	Middle Name	Last Name			
21. Other	. Specify:				21	\$0.00
22. Calc ı	ılate your monthly ex	penses.				\$1,955.00
22a. <i>A</i>	Add lines 4 through 21.					\$0.00
22b. 0	Copy line 22 (monthly e	xpenses for Debtor 2), if any, fro	m Official Form 106J-2			\$1,955.00
22c. A	add line 22a and 22b. T	he result is your monthly expens	ses.		22.	<u> </u>
23.Calcu	late your monthly ne	t income.				
23a. C	Copy line 12 (your comb	pined monthly income) from Sch	edule I.		23a	\$1,939.17
23b. C	Copy your monthly expe	nses from line 22 above.			23b	\$1,955.00
		xpenses from your monthly incor	ne.			(\$15.83)
	The result is your mont	hly net income.			23c	
24. Do y o	ou expect an increase	e or decrease in your expense	es within the year after you	ı file this form?		
		to finish paying for your car loar ase or decrease because of a m				
1	No					
	⁄es					
	Explain here:					

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 39 of 70

Fill in this infor	mation to identify your cas	e:		
Debtor 1	Brandi		Henry	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	g) First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	Northern	District of Illinois(State)	
Case number (If known)			(Ciato)	

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to h	elp you fill out bankruptcy forms?
	☑ No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary at that they are true and correct.	nd schedules filed with this declaration and
~	•	×
X	/s/ Brandi Henry Signature of Debtor 1	Signature of Debtor 2
	Orgination of Position 1	digitation of boots 2
	Date 11/22/2016	Date
	MM/DD/YYYY	MM/DD/YYYY

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Page 40 of 70 Document

Debtor 1	Brandi		Henry	
	First Name	Middle Name	Last Name	_
Debtor 2				Check if this is:
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended filing
United States Ba	ankruptcy Court for the:	Northern	District of Illinois (State)	A supplement showing post-petition chapter 1 expenses as of the following date:
Case number (If known)				_
(II Idiowill)				MM / DD / YYYY

12/15

Use this form for Debtor's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. If Debtor 1 and Debtor 2 have one or more dependents in common, list the dependents on both Schedule J and this form. Answer the questions on this form only with respect to expenses for Debtor 2 that are not reported on Schedule J. Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household	
1.Do you and Debtor 1 maintain separate households?	
No. Do not complete this form.	
Yes.	

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 41 of 70

Debtor 1	Brandi First Nam	ne .	Middle	Henry Name Last Nar				
ebtor 2	riistivan		Wildaic	ranc Lastrai	no no			
	filing) First Nam	ne	Middle	Name Last Nar	ne			
nited Stat	tes Bankruptcy (Court for the:	Northern	District of Illino	ois			
				(Sta	ate)			
ase numb known)								
Officia	al Form	107						Check if this is amended filing
			ial Affair	s for Individu	als Filing	g for Ba	ankruptcy	/ 12
ace is ned	eded, attach a	separate sh	eet to this form. C	On the top of any addition	al pages, write y			correct information. If mo known). Answer every
art 1: G	ive Details	About You	ır Marital Statu	us and Where You Li	ved Before			
Wha	at is your curre	ent marital s	tatus?					
_	N. A. a. and a. al.							
	Married							
	Married Not married							
✓	Not married	pare havo v	ou lived appropria	other than where you live	o now?			
Duri	Not married	ears, have ye	ou lived anywhere	e other than where you live	e now?			
Duri	Not married ing the last 3 ye		•	·				
Duri	Not married ing the last 3 ye		•	e other than where you live ears. Do not include where				
Duri	Not married ing the last 3 ye		•	·				Dates Debtor 2 lived there
Duri	Not married ing the last 3 ye No Yes. List all of th		•	ears. Do not include where y Dates Debtor 1 lived	you live now. Debtor 2:	Debtor 1		there
Duri	Not married ing the last 3 ye No Yes. List all of the Debtor 1:	ne places you	•	ears. Do not include where y Dates Debtor 1 lived	you live now.	Debtor 1		
Duri	Not married ing the last 3 ye No Yes. List all of th	ne places you	•	ears. Do not include where y Dates Debtor 1 lived	you live now. Debtor 2:			there
Duri	Not married ing the last 3 ye No Yes. List all of the last 1: Debtor 1:	ne places you	•	ears. Do not include where y Dates Debtor 1 lived there	Debtor 2:			there Same as Debtor 1
Duri	Not married ing the last 3 ye No Yes. List all of the last 1: Debtor 1:	ne places you	•	Dates Debtor 1 lived there From 06/01/2012	Debtor 2:			there Same as Debtor 1 From
Duri	Not married ing the last 3 ye No Yes. List all of the Debtor 1: 2704 Turtle Cree Number Street	ne places you	lived in the last 3 ye	Dates Debtor 1 lived there From 06/01/2012	Debtor 2:		Zip Code	there Same as Debtor 1 From
Duri	Not married ing the last 3 ye No Yes. List all of the last 3 ye Debtor 1: 2704 Turtle Cre Number Street Hazel Crest	ne places you eek Drive	lived in the last 3 ye	Dates Debtor 1 lived there From 06/01/2012	Debtor 2: Same as Number Street	et State	Zip Code	there Same as Debtor 1 From
Duri	Not married ing the last 3 ye No Yes. List all of the Debtor 1: 2704 Turtle Cre Number Street Hazel Crest City	ne places you nek Drive Illinois State	lived in the last 3 ye	Dates Debtor 1 lived there From 06/01/2012	Debtor 2: Same as Number Stree City Same as	State Debtor 1	Zip Code	there Same as Debtor 1 From To
Duri	Not married ing the last 3 ye No Yes. List all of the last 3 ye Debtor 1: 2704 Turtle Cre Number Street Hazel Crest	ne places you nek Drive Illinois State	lived in the last 3 ye	Prom 06/01/2012 To 05/01/2016 From	Debtor 2: Same as Number Street	State Debtor 1	Zip Code	there Same as Debtor 1 From To Same as Debtor 1
Duri	Not married ing the last 3 ye No Yes. List all of the Debtor 1: 2704 Turtle Cre Number Street Hazel Crest City	ne places you nek Drive Illinois State	lived in the last 3 ye	Pates Debtor 1 lived there From 06/01/2012 To 05/01/2016	Debtor 2: Same as Number Stree City Same as	State Debtor 1	Zip Code	there Same as Debtor 1 From To Same as Debtor 1 From From

✓ No

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 42 of 70

Deb	tor 1		Henry		number (if known)	
			Name Last Nar	ne		
Part	2:	Explain the Sources of Your	ncome			
	Fill i	you have any income from employm in the total amount of income you receive vities. If you are filing a joint case and you No Yes. Fill in the details.	ed from all jobs and all busine	esses, including part-time		ars?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		rom January 1 of current year until ne date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$13674.00	Wages, commissions, bonuses, tips Operating a business	
		for last calendar year: January 1 to December 31, 2015) YYYY	Wages, commissions, bonuses, tips Operating a business	\$10570.00	Wages, commissions, bonuses, tips Operating a business	
		for the calendar year before that: January 1 to December 31, 2014) YYYY	Wages, commissions, bonuses, tips Operating a business	\$6000.00	Wages, commissions, bonuses, tips Operating a business	
 	Inclui bene case	you receive any other income during ade income regardless of whether that incefit payments; pensions; rental income; in and you have income that you received each source and the gross income from No Yes. Fill in the details.	come is taxable. Examples of sterest; dividends; money colle together, list it only once unde	other income are alimony; chected from lawsuits; royalties r Debtor 1.	; and gambling and lottery winni	
•			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		From January 1 of current year until he date you filed for bankruptcy:				
		For last calendar year: (January 1 to December 31, 2015) YYYY				
		For the calendar year before that: (January 1 to December 31, 2014) YYYY				

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 43 of 70

First Name		Middle Name	Last Name		IIIDel (// known)	
List Cer	tain Paymer	nts You Made I	Before You Filed fo	r Bankruptcy		
a aithar Dahi	tor 1's or Debt	or 2's debts nrim:	arily consumer debts?			
_			-			
-		r Debtor 2 has pri al, family, or househ	-	. Consumer debts are define	ed in 11 U.S.C. § 101(8) as "ind	curred by an individual
During	the 90 days be	fore you filed for ba	nkruptcy, did you pay any	creditor a total of \$6,425* or	more?	
■ N	o. Go to line 7.					
☐ Y	total amour	nt you paid that cred	ditor. Do not include paym	25* or more in one or more p ents for domestic support ob s to an attorney for this bankr	oligations, such as	
* Subje	ect to adjustmen	nt on 4/01/19 and ev	very 3 years after that for o	cases filed on or after the date	e of adjustment.	
Yes. Debto	or 1 or Debtor 2	2 or both have pri	imarily consumer debts	S.		
•		_	-		uro?	
_	•	nore you liled for ba	ii iki upicy, did you pay any	creditor a total of \$600 or mo	ne:	
✓ N	o. Go to line 7.					
<u>.</u>	that credito	r. Do not include pa		or more and the total amour port obligations, such as chil this bankruptcy case.		
			Dates of payment	Total amount paid	Amount you still owe	Was this payment
			_	-		for Mortgage
Creditor's I	Name					Car
Number St	reet	_				Credit card
						Loan repayme
City	Ctoto	Zin Codo				Suppliers or
City	State	Zip Code				vendors Other
Creditor's I	Name					☐ Mortgage ☐ Car
Number St	reet					Credit card
						Loan repayme
						Suppliers or
City	State	Zip Code				vendors
						Other
Creditor's I	Name			-		☐ Mortgage ☐ Car
Number St	reet					Credit card
						Loan repayme
0::	<u> </u>					Suppliers or
City	State	Zip Code				vendors
						Other

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 44 of 70

Deptor I	Brandi			He	enry	Case number ((if known)
	First Name		Middle Name		st Name		
Insid corp age	ders include your roorations of which	relatives; an you are an or or a busines	y general partners; officer, director, per s you operate as a	relatives of any son in control, or	r owner of 20% or mo	tnerships of which y are of their voting se	ho was an insider? /ou are a general partner; curities; and any managing pmestic support obligations,
✓	No						
Ц	Yes. List all paym	ents to an II	nsider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name				· ———		
	Number Street						
	City	State	Zip Code				
insi	der?		or bankruptcy, die		payments or trans	fer any property o	n account of a debt that benefited an
✓	No Yes. List all payme	ents that be	nefited an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
							madde creditors name
	Insider's Name				,		
	Number Street						
	City	State	Zip Code				
	Insider's Name				·		
	Number Street						
	City	State	Zip Code				

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 45 of 70

ntract disputes. No Yes. Fill in the de Case title City Chicago v Case number 2013-M1-6698							
Yes. Fill in the de Case title City Chicago v Case number							
Case title City Chicago v Case number							
City Chicago v Case number	r Henry Brandi						
City Chicago v Case number	Henry Brandi		re of the case	Court or a	gency		Status of the case
Case number	Henry Brandi	0	stration of	Cook Coun	ty Circuit Cour	t	Pending
		Admi	nistrative Judgment	Court Name			On appeal
2013-M1-6698				50 West Wa NumberStre	ashington Stre	et	Concluded
	63	_		Chicago	Illinois	60602	_
				City	State	Zip Code	
Case title							Pending
		_		Court Name)		On appeal
Case number				NumberStre			Concluded
				NumberStre	eet		
				City	State	Zip Code	
103.1111111101	nformation below.						
103.1 111 111 1110 1	nformation below.		Describe the prope	erty		Date	Value of the
res. I ill ill tile I	nformation below.						property
CONSUMER	PORTFOLIO SVC		Describe the proper			Date	property
_	PORTFOLIO SVC		Repossessed 2012	Mazda Mazda6			property
CONSUMER Creditor's Name	PORTFOLIO SVC ne 1			Mazda Mazda6			property
CONSUMER Creditor's Nam	PORTFOLIO SVC ne 1		Repossessed 2012	Mazda Mazda6			property
CONSUMER Creditor's Name	PORTFOLIO SVC ne 1		Explain what happ	Mazda Mazda6 ened possessed.			property
CONSUMER Creditor's Nan PO BOX 57071 Number Stree	PORTFOLIO SVC ne 1 et		Explain what happ Property was re Property was fo	Mazda Mazda6 ened possessed. reclosed.			property
CONSUMER I Creditor's Nan PO BOX 57071 Number Stree	PORTFOLIO SVC ne 1 et California	92619 7in Code	Explain what happ Property was re Property was fo Property was ga	Mazda Mazda6 ened possessed. reclosed. arnished.	r Invited		property
CONSUMER Creditor's Nam PO BOX 57071 Number Stree	PORTFOLIO SVC ne 1 et California	92619 Zip Code	Explain what happ Property was re Property was fo Property was ga Property was att	Mazda Mazda6 ened possessed. reclosed. arnished. acched, seized, o	r levied.	10/15/20	property 16 \$0
CONSUMER I Creditor's Nan PO BOX 57071 Number Stree	PORTFOLIO SVC ne 1 et California		Explain what happ Property was re Property was fo Property was ga	Mazda Mazda6 ened possessed. reclosed. arnished. acched, seized, o	r levied.		property 16 \$0 Value of the
CONSUMER I Creditor's Nan PO BOX 57071 Number Stree	PORTFOLIO SVC ne 1 et California		Explain what happ Property was re Property was fo Property was ga Property was att	Mazda Mazda6 ened possessed. reclosed. arnished. acched, seized, o	r levied.	10/15/20	property 16 \$0
CONSUMER Creditor's Nam PO BOX 57071 Number Stree	PORTFOLIO SVC ne 1 et California State 2		Explain what happ Property was re Property was fo Property was ga Property was att	Mazda Mazda6 ened possessed. reclosed. arnished. acched, seized, o	r levied.	10/15/20	property 16 \$0 Value of the
CONSUMER I Creditor's Nan PO BOX 57071 Number Stree	PORTFOLIO SVC ne 1 et California State 2		Explain what happ Property was re Property was fo Property was ga Property was att Pescribe the property	Mazda Mazda6 ened possessed. reclosed. arnished. rached, seized, o	r levied.	10/15/20	property 16 \$0 Value of the
CONSUMER I Creditor's Nam PO BOX 57071 Number Stree IRVINE City Creditor's Nam	PORTFOLIO SVC ne 1 et California State 2		Explain what happ Property was re Property was fo Property was ga Property was att	Mazda Mazda6 ened possessed. reclosed. arnished. rached, seized, o	r levied.	10/15/20	property 16 \$0 Value of the
CONSUMER Creditor's Nan PO BOX 57071 Number Stree	PORTFOLIO SVC ne 1 et California State 2		Explain what happ Property was re Property was ga Property was att Property was att Describe the property Explain what happ	Mazda Mazda6 ened possessed. reclosed. amished. rached, seized, o	r levied.	10/15/20	property 16 \$0 Value of the
CONSUMER Creditor's Nam PO BOX 57071 Number Stree IRVINE City Creditor's Nam	PORTFOLIO SVC ne 1 et California State 2		Explain what happ Property was re Property was ga Property was att Property was att Describe the property Explain what happ	Mazda Mazda6 ened possessed. reclosed. arnished. rached, seized, o	r levied.	10/15/20	property 16 \$0 Value of the
CONSUMER Creditor's Nam PO BOX 57071 Number Stree IRVINE City Creditor's Nam	PORTFOLIO SVC ne 1 et California State 2		Explain what happ Property was re Property was ga Property was att Property was att Describe the property Explain what happ	Mazda Mazda6 ened possessed. reclosed. arnished. rached, seized, o erty ened possessed. reclosed.	r levied.	10/15/20	property 16 \$0 Value of the
							property

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 46 of 70

Deb	tor 1	Brandi		Henry	Case number (if known)		
		First Name Middle	Name	Last Name			
11.		thin 90 days before you filed for banl counts or refuse to make a payment b			ank or financial institution, s	et off any amou	nts from your
	✓	No Yes. Fill in the details.					
				Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account n	umber: XXXX-		
		City State Zi	p Code				
12.		hin 1 year before you filed for bankro pointed receiver, a custodian, or ano		of your property in the p	oossession of an assignee fo	or the benefit of o	creditors, a court-
	✓	No Yes					
Part	5-	List Certain Gifts and Contri	hutions				
13.	Wi	ithin 2 years before you filed for ban	kruptcy, did yo	u give any gifts with a to	otal value of more than \$600	per person?	
	✓						
	L	Yes. Fill in the details for each gift.	n \$600	Describe the gifts		Dates you	Value
		Gifts with a total value of more that per person	III \$000	Describe the gifts		gave the gifts	value
							<u> </u>
		Person to Whom You Gave the Gift					
		Number Street					
		City State Zi Person's relationship to you	p Code				
		Person to Whom You Gave the Gift					
		Number Street					
		City State Zi Person's relationship to you	p Code				
		i crooms relationiship to you					

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 47 of 70

Deb	tor 1	Brandi			Henry	Case number (if known)		
		First Name		Middle Name	Last Name			
14.	Wit	nin 2 years before	you filed fo	r bankruptcy, did y	ou give any gifts or contribution	ons with a total value of	more than \$600 t	o any charity?
	V	No						
		Yes. Fill in the deta	ils for each o	gift or contribution.				
		Gifts or contribu	tions to cha	arities	Describe what you contribu	ıted	Date you	Value
		that total more th	nan \$600				contributed	
								-
		Charity's Name						
		Number Street						
		City	State	Zip Code				
Part	6:	List Certain Lo	sses					
15.	With	nin 1 year before y	ou filed for	bankruptcy or sind	ce you filed for bankruptcy, did	you lose anything becar	use of theft, fire,	other disaster, or
	gam	bling?						
	✓	No						
		Yes. Fill in the deta	ils.					
		Describe the pro	perty you lo	st and	Describe any insurance cov	verage for the loss	Date of your	Value of property
		how the loss occ	urred		Include the amount that insura	nce has paid. List	loss	lost
					pending insurance claims on l	line 33 of Schedule		
					A/B: Property.			
Part		List Certain Pa		T				
		de any attorneys, b No Yes. Fill in the deta		etition preparers, or c	redit counseling agencies for serv	ices required in your bank	гиртсу.	
					Description and value of an transferred	y property	Date payment or transfer was made	Amount of payment
		Semrad Law Firm			Attorney's Fee - 0.00		11/23/2016	\$0.00
		Person Who Was I	Paid					*****
		11101 S. Western A	Avenue					
		Number Street						
				_				
		Chicago	Illinois	60643				
		City	State	Zip Code				
		 						
		Email or website a None	ddress					
		Person Who Made	the Pavmen	nt. if Not You				
				,				
		Person Who Was I	Paid					
		T GIGGIT TITLE TYGG	ala					
		Number Street		_				
		City						
			State	Zip Code				
		Email or websites		Zip Code				
		Email or website a		Zip Code				

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 48 of 70

Deb	tor 1	Brandi		Henry	Case number (if known)		
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed to you deal with your credito not include any payment or tra No Yes. Fill in the details.	ors or to make payment		our behalf pay or transfer	any property to any	one who promised to
	ш	res. Fill III the details.					
				Description and value of transferred	any property		Amount of payment
		Person Who Was Paid					
		Number Street	_				
		City State	Zip Code				
		Oily State	Zip Code				
		ude both outright transfers and sfers that you have already list No Yes. Fill in the details.		ırity (such as the granting of a			Do not include gifts and
				Description and value of property transferred		y property or eceived or debts pai	Date transfer was made
		Person Who Received Tran	esfer				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Tran	sfer				
		Number Street					
		City State Person's relationship to you	Zip Code				
19.		hin 10 years before you file ese are often called asset-pro		ou transfer any property to	a self-settled trust or simi	lar device of which y	you are a beneficiary?
	<u>~</u>	No					
	Ц	Yes. Fill in the details.		Description and value o	f the property transferred	d	Date transfer was made
		Name of trust					

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 49 of 70

Debtor 1	Brandi First Name Middle Name	Henry Last Name	Case number (if known)	
Part 8:	List Certain Financial Accounts, Ins		xes, and Storage Units	
20. W m c	ithin 1 year before you filed for bankruptcy, wo	ere any financial accounts or instru	uments held in your name, or for your benefit, sit; shares in banks, credit unions, brokerage house	
_	No Yes. Fill in the details.	Last 4 digits of account number	Type of account or instrument account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Person Who Was Paid Number Street	- xxxx- - -	Checking Savings Money market Brokerage Other	
	City State Zip Code Person Who Was Paid Number Street	- XXXX- - -	Checking Savings Money market Brokerage Other	
	City State Zip Code you now have, or did you have within 1 year her valuables? No Yes. Fill in the details.		ny safe deposit box or other depository for sec	
	Name of Financial Institution	Who else had access to it? Name	Describe the contents	Do you still have it?
	Number Street City State Zip Code	Number Street City State Zip	Code	Yes
22. Ha	ave you stored property in a storage unit or pla No Yes. Fill in the details.	·		
		Who else had access to it?	Describe the contents	Do you still have it?
	Name of Storage Facility Number Street	Name Number Street		No Yes
	Number Street		Code	
	City State Zip Code			

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 50 of 70

ebtor '		Henry				
	First Name Middle Name	Last N				
rt 9:	Identify Property You Hold or Cont	rol for Someo	ne Else			
. Do	you hold or control any property that some	one else owns? In	oclude any i	nronerty you h	porrowed from are storing for or hold	in trust for
	meone.	one eise owns: in	iciuue arry	property you b	norrowed from, are storing for, or floid	iii ti ust ioi
	l vi-					
¥	No Yes. Fill in the details.					
<u> </u>	Tes. Fill lift the details.	Where is the p	oronortu?		Describe the contents	Value
		where is the p	property :		Describe the contents	Value
	Owner's Name	Number Street				
	Number Street					
		0::				
		City	State	Zip Code		
	City State Zip Code					
art 10	Give Details About Environmental	Information				
or the	purpose of Part 10, the following definitions apply	/ :				
	Environmental law means any federal, state, or lo	•		•	•	
	hazardous or toxic substances, wastes, or materi			. •		
	including statutes or regulations controlling the cl	leanup of triese sub	ostances, wa	istes, or materia	al.	
	Site means any location, facility, or property as de	•	rironmental la	aw, whether you	now own, operate, or utilize it	
	or used to own, operate, or utilize it, including dis	sposai sites.				
	Hazardous material means anything an environm			s waste, hazard	ous substance,	
	Hazardous material means anything an environm toxic substance, hazardous material, pollutant, co			s waste, hazard	ous substance,	
		ontaminant, or simila	ar term.		ous substance,	
	toxic substance, hazardous material, pollutant, co	ontaminant, or simila	ar term.		ous substance,	
eport	toxic substance, hazardous material, pollutant, co	ontaminant, or simila	ar term. ss of when th	ney occurred.		?
eport	toxic substance, hazardous material, pollutant, co	ontaminant, or simila	ar term. ss of when th	ney occurred.		?
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo	ontaminant, or simila	ar term. ss of when th	ney occurred.		?
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No	ontaminant, or simila	ar term. ss of when th	ney occurred.		Date of
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No	ontaminant, or simila now about, regardles ou may be liable or	ar term. ss of when th	ney occurred.	or in violation of an environmental law	
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you No Yes. Fill in the details.	ontaminant, or similation about, regardles ou may be liable or Governmental	ar term. ss of when the potentially I unit	ney occurred.	or in violation of an environmental law	Date of
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No	ontaminant, or simila now about, regardles ou may be liable or	ar term. ss of when the potentially I unit	ney occurred.	or in violation of an environmental law	Date of
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you No Yes. Fill in the details.	ontaminant, or similation about, regardles ou may be liable or Governmental	ar term. ss of when the potentially I unit	ney occurred.	or in violation of an environmental law	Date of
eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have a likely on the coally likely	contaminant, or similar now about, regardles ou may be liable or Governmental Governmental un Number Street	ar term. ss of when the repotentially I unit	ney occurred.	or in violation of an environmental law	Date of
eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have a likely on the coally likely	ontaminant, or similation about, regardles ou may be liable or Governmental	ar term. ss of when the potentially I unit	ney occurred.	or in violation of an environmental law	Date of
eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have a likely on the coally likely	contaminant, or similar now about, regardles ou may be liable or Governmental Governmental un Number Street	ar term. ss of when the repotentially I unit	ney occurred.	or in violation of an environmental law	Date of
eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have a substance of site. Name of site Number Street City State Zip Code	Governmental Governmental Governmental City	ar term. ss of when the repotentially I unit Unit State	riable under o	or in violation of an environmental law	Date of
eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have any governmental unit notified you have any governmental unit n	Governmental Governmental Governmental City	ar term. ss of when the repotentially I unit Unit State	riable under o	or in violation of an environmental law	Date of
eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have a substance of site. Name of site Number Street City State Zip Code	Governmental Governmental Governmental City	ar term. ss of when the repotentially I unit Unit State	riable under o	or in violation of an environmental law	Date of
eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have a likely of the second of the	Governmental Governmental Governmental City	ar term. ss of when the repotentially I unit Unit State	riable under o	or in violation of an environmental law	Date of
eport	toxic substance, hazardous material, pollutant, corall notices, releases, and proceedings that you know as any governmental unit notified you that you have a sany governmental unit notified you that you have a sany governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any notified any governmental un	Governmental Governmental Governmental City	ar term. ss of when the repotentially I unit State dous mater	riable under o	or in violation of an environmental law	Date of
eport	toxic substance, hazardous material, pollutant, corall notices, releases, and proceedings that you know as any governmental unit notified you that you have a sany governmental unit notified you that you have a sany governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any notified any governmental un	contaminant, or similar and about, regardles on about, regardles ou may be liable or Governmental un Number Street City y release of hazard	ar term. ss of when the repotentially I unit State dous mater	riable under o	Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have any governmental unit notified you that you have you. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any yes. Fill in the details.	contaminant, or similar and about, regardles for may be liable or Governmental un Number Street City Governmental Governmental Governmental Governmental	ar term. ss of when the repotentially I unit State dous mater I unit	riable under o	Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, corall notices, releases, and proceedings that you know as any governmental unit notified you that you have a sany governmental unit notified you that you have a sany governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any notified any governmental un	contaminant, or similar and about, regardles on about, regardles ou may be liable or Governmental un Number Street City y release of hazard	ar term. ss of when the repotentially I unit State dous mater I unit	riable under o	Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have any governmental unit notified you that you have you. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any yes. Fill in the details.	contaminant, or similar and about, regardles for may be liable or Governmental un Number Street City Governmental Governmental Governmental Governmental	ar term. ss of when the repotentially I unit State dous mater I unit	riev occurred. y liable under o	Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have any governmental unit notified you that you have you. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	City Governmental Governmental Governmental Governmental Governmental Governmental Governmental Governmental	ar term. ss of when the repotentially I unit State dous mater I unit	riev occurred. y liable under o	Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have any governmental unit notified you that you have you. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	City Governmental Governmental Governmental Governmental Governmental Governmental Governmental Governmental	ar term. ss of when the repotentially I unit State dous mater I unit	riev occurred. y liable under o	Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have any governmental unit notified you that you have you. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	Governmental Governmental City Governmental Governmental Governmental City Governmental Governmental Governmental Governmental	ar term. ss of when the repotentially I unit State dous mater I unit	Zip Code	Environmental law, if you know it	Date of notice

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 51 of 70

Deb	tor 1	Brandi			Henry	Case	e number (if known)	
		First Name		Middle Name	Last Name			
26.	Hav	e you been a party	/ in any judici	al or administra	tive proceeding under	any environment	al law? Include settlements and order	s.
	✓	No						
		Yes. Fill in the deta	ils.					
				(Court or agency		Nature of the case	Status of the case
		Case title						—
					Court Name			Pending
				<u> </u>	Sourt Harris			On appeal
		Case number		1	Number Street			Concluded
				(City State	Zip Code		
		مینی م	1 4 34		• • • •	ъ.		
Part	11:	Give Details A	bout Your	Business or	Connections to Ar	y Business		
27.	With	nin 4 vears before	you filed for	hankruptev did v	vou own a business or	have any of the f	ollowing connections to any business	.?
21.	*****	IIII 4 years before	you med for	banki uptoy, ala	you own a business of	nave any or the r	onowing connections to any business	, .
		A sole propriet	tor or self-emp	loyed in a trade, p	profession, or other activit	y, either full-time o	r part-time	
		A member of a	a limited liability	y company (LLC)	or limited liability partners	ship (LLP)		
		A partner in a	partnership					
		An officer, dire	ctor, or manag	ing executive of a	a corporation			
			-		securities of a corporation	n		
		_			, , , , , , , , , , , , , , , , , , ,			
	\blacksquare	No. None of the abo						
	Ш	Yes. Check all that	apply above ar	nd fill in the details	below for each business			
					Describe the natu	re of the busines		
							include Social Security nu	ımber or ITIN.
		Business Name			_		EIN:	
		Business Name						
		Number Street			_		Dates business existed	
		Number Street			Name of account	ant or bookkeepe	er	
		City	State	Zip Code	_		From To	
		City	Siale	Zip Code				
					Describe the natu	ire of the busines		
							include Social Security nu	imper or IIIN.
		Business Name			_		EIN:	
		Dusiliess Natile						
		Number Street			_		Dates business existed	
		. Idinion Office			Name of account	ant or bookkeepe	er	
		City	State	Zip Code			From To	
		J.,	Ciaio	p 0000				
								_
					Describe the natu	re of the busines	Employer Identification n include Social Security nu	
							EIN:	
		Business Name						
		Number Street			_		Dates business existed	
		TAUTHOEL STEEL			Name of account	ant or bookkeepe		
		City	Ctoto	Zin Cod-			From To	
		City	State	Zip Code				

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 52 of 70

Deb	otor 1	Brandi		Henry	Case number (if known)
		First Name	Middle Name	Last Name	
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include creditors, or other parties.					t to anyone about your business? Include all financial institutions,
		No Yes. Fill in the details be	alow		
		res. I iii iii tile detaile be	now.	Date issued	
		Name		MM/DD/YYYY	
		Number Street			
		City S	State Zip Code		
Part	t 12:	Sign Below			
	true a	and correct. I understa	nd that making a false stater	ment, concealing property	ts, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		/s/ Bran	di Henry		Signature of Debtor 2
		Signature o	Debior 1		Date
		Date 11/22	2/2016		Date
	Did y	ou attach additional p	ages to Your Statement of Fi	nancial Affairs for Individ	luals Filing for Bankruptcy (Official Form 107)?
	_	10			,
		es			
	ш'	63			
	Did y	ou pay or agree to pay	someone who is not an atto	rney to help you fill out ba	ankruptcy forms?
	✓ N	lo			
	□ Y	es. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 53 of 70

Fill in this information to identify your case:				
Debtor 1	Brandi		Henry	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if fili	^{ng)} First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Northern	District of Illinois	_
Case number (If known)			(State)	_

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

Part 1: List Your Creditors Who Have Secured Claims

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property as exempt on Schedule C? secures a debt? Surrender the property. No. Creditor's name: CONSUMER PORTFOLIO SVC Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Automobile Retain the property and [explain]: No. Surrender the property. Creditor's name: Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt:

Retain the property and [explain]:

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 54 of 70

Debtor	Brandi		Henry	Case number (if	
1	First Name	Middle Name	Last Name	known)	
iot Vou	r Unavaired Barcanal	Property Leases		Part 2:	
	r Unexpired Personal		Schedule G: Executory (Contracts and Unexpired Leases (Official Form 106G), fill in the	
informa		estate leases. Unexpired le	ases are leases that are	still in effect; the lease period has not yet ended. You may assur	
Des	cribe your unexpired perso	nal property leases		Will the lease be assumed?	
Less	sor's name:			No Yes	
	cription of leased erty:				
Less	sor's name:			☐ No ☐ Yes	
	cription of leased erty:				
Less	sor's name:			☐ No ☐ Yes	
	cription of leased erty:				
Less	sor's name:			☐ No ☐ Yes	
	cription of leased erty:				
Less	sor's name:			☐ No ☐ Yes	
	cription of leased erty:				
Less	sor's name:			☐ No ☐ Yes	
	cription of leased erty:				
Less	sor's name:			No Yes	
	cription of leased erty:				
Part 3:	Sign Below				
Unde			intention about any pro	operty of my estate that secures a debt and any personal	
		-	4.5		
	s/ Brandi Henry gnature of Debtor 1		Signs	ature of Debtor 1	
			Signa	ature of Debitor 1	
Da	ate 11/22/2016 MM/DD/YYYY		Date	· MM/DD/YYYY	

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 55 of 70

B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Brandi Henry	Case No				
_	Debtor		(If known)			
		Chapter	Chapter 7			
	DISCLOSURE OF COMP	ENSATION OF ATTORNE	Y FOR DEBTOR			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bank that compensation paid to me within one year services rendered or to be rendered on behalf is as follows:	r before the filing of the petition in bankrup	tcy, or agreed to be paid to me, for			
	For legal services, I have agreed to accept		\$1,400.00			
	Prior to the filing of this statement I have rec	eived	\$0.00			
	Balance Due		\$1,400.00			
2.	The source of the compensation paid to me w	vas:				
	✓ Debtor	Other (specify)				
3.	The source of the compensation paid to me is	s:				
	Debtor	Other (specify)				
4.	I have not agreed to share the above-dis members and associates of my law firm.	closed compensation with any other perso	n unless they are			
		ed compensation with a other person or pe A copy of the agreement, together with a l is attached.				
5.		n return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;				
	b. Preparation and filing of any petition,	schedules, statements of affairs and plan	which may be required;			
	c. Representation of the debtor at the me	eeting of creditors and confirmation hearing	g, and any adjourned hearings thereof;			
6.	By agreement with the debtor(s), the above-d	lisclosed fee does not include the following	g services:			
		CERTIFICATION				
	I certify that the foregoing is a complete stater ne debtor(s) in this bankruptcy proceedings.	nent of any agreement or arrangement for	payment to me for representation			
	11/22/2016	/s/ Amy Gerstein				
	Date	Signature of Attorne				
		Semrad Law Firm				
		Name of law firm				

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 60 of 70

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Henry, Brandi	Case No				
_	Debtor(s)					
		Chapter. Chapter7				
	VERIFICATION OF CREDITOR MATRIX					
	The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge					
Date:	11/22/2016	/s/ Henry, Brandi				
		Henry, Brandi Signature of Debtor				

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,400.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filling of my case. I have been advised that I have a right to consult other counsel before I sign

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 62 of 70

the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 11/22/2016	
Client Brade A	Client
Attorney (Attorney	

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 63 of 70

Debtor 1 Brandi			Case number (if known)			
First Name Part 6: Answer These Qu		ast Name				
16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts.					
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☑ No.	7. Do you estimate that after	er any exempt property is ex tribute to unsecured credito			
^{18.} How many creditors do you estimate that you owe?	✓ 1-49☐ 50-99☐ 100-199☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	5 0	,001-50,000 ,001-100,000 ore than 100,000		
19. How much do you estimate your assets to be worth?		\$1,000,001-\$1 \$10,000,001-\$ \$50,000,001-\$ \$100,000,001	\$50 million	00,000,001-\$1 billion ,000,000,001-\$10 billion 0,000,000,001-\$50 billion ore than \$50 billion		
²⁰ · How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$1 \$10,000,001-\$ \$50,000,001-\$ \$100,000,001	\$50 million	00,000,001-\$1 billion ,000,000,001-\$10 billion 0,000,000,001-\$50 billion ore than \$50 billion		
Part 7: Sign Below						
For you I have examined this petition, and I declare under penalty of perjury that the information provided is true a correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, of title 11, United States Code. I understand the relief available under each chapter, and I choose to procedunder Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me				under Chapter 7, 11,12, or 13 or, and I choose to proceed		
	out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
Tremon Maria	/s/ Brandi Henry DMM	nd Rt	X Signature of Debtor 2			
	Signature of Debtor 1 Signature of Debtor 2 Executed on					
	MM / DD /	. 1111	M	M / DD / YYYY		

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 64 of 70

Debtor 1	Brandi		Henry	
Debtor 2	First Name	Middle Name	Last	Name
(Spouse, if filing)	First Name	Middle Name	Last	Name
United States Bankruptcy Court for the:		Northern	District of	
Case number (If known)				(State)
Official	Form 106De	e <u>C</u>		
Declarat	ion About an	Individual Deb	otor's S	chedules
		er, both are equally resp		

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	1: Sign Below					
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?					
	✓ No					
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).				
A 0.00 A						
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and				
×	/s/ Brandi Henry	×				
	Signature of Debtor 1	Signature of Debtor 2				
	Date 11/22/2016 MM/DD/YYYY	Date MM/DD/YYYY				

Check if this is an amended filing

12/15

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 65 of 70

Debto	or 1 Brandi	Henry	Case number (if known)				
	First Name Middle Name	Last Name					
	Within 2 years before you filed for bankruptcy, did goreditors, or other parties.	you give a financial state	ment to anyone about your business? Include all financial institutions,				
ı	☑ No						
ĺ	Yes. Fill in the details below.						
		Date issued					
	Name	MM/DD/YYYY					
	Number Street						
	City State Zip Code						
Part 1	12: Sign Below						
	I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.						
	Signature of Debtor 1		Signature of Debtor 2				
	Date 11/22/2016		Date				
Di	Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?						
	No Yes						
Di	d you pay or agree to pay someone who is not an a	attorney to help you fill o	ut bankruptcy forms?				
V	No No						
	Yes. Name of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).				

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 66 of 70

Jebtoi	r Brandi		Henry	Case number (if
1	First Name	Middle Name	Last Name	known)
art 2:	List Your Unex	pired Personal Property Lease	es .	
nforma	ation below. Do no		leases are leases that a	Contracts and Unexpired Leases (Official Form 106G), fill in the restill in effect; the lease period has not yet ended. You may J.S.C. § 365(p)(2).
De	scribe your unexpi	red personal property leases		Will the lease be assumed?
Les	ssor's name:			No Yes
	scription of leased operty:			_
Les	ssor's name:		аременян і на перед надзента праводня на у стадон і до не пона доржання.	□ No □ Yes
	scription of leased operty:			_
Les	ssor's name:			□ No □ Yes
	scription of leased operty:			_
Les	ssor's name:			□ No □ Yes
	scription of leased operty:			
Les	ssor's name:			☐ No ☐ Yes
	scription of leased operty:			
Les	ssor's name:			☐ No ☐ Yes
	scription of leased operty:			
Les	ssor's name:	N. A. S. Manda III. Jan C. L. Trimmorphic expenses on the control of the control		□ No □ Yes
	scription of leased perty:			_
	Sign Below	a video a tito a como a como de como d	August Mataines and Company - 「August Mataines August Aug	Annon a commence to the state of the state o
Unde prop	er penalty of perjur erty that is subjec	y, I declare that I have indicated n t to an unexpired lease.	ny intention about any p	roperty of my estate that secures a debt and any personal
-	/s/ Brandi Henry ignature of Debtor 1	Branch D	≭ Sign	ature of Debtor 1
D	tate 11/22/2016 MM/DD/YYYY		Date	MM/DD/YYYY

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 67 of 70

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Henry, Brandi Debtor(s)	Case No.	
	,	Chapter.	Chapter7
	VERIF	ICATION OF CREDITOR MAT	RIX
Ti knowledge		ify that the attached list of creditors is tr	ue and correct to the best of their
Date:	11/22/2016	/s/ Henry, Brandi Henry, Brandi Signature of Deb	1911/109

Case 16-37237 Doc 1 Filed 11/22/16 Entered 11/22/16 21:14:02 Desc Main Document Page 68 of 70

Debtor 1 Brandi		Henry	Case number (if kn	own)	
First Name	Middle Name	Last Name	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
Unemployment compensation Do not enter the amount if you contunder the Social Security Act. Instead	I, list it here:	, 4	\$0.00		
For your spouse	-	60.00 60.00			
Pension or retirement income. Do benefit under the Social Security Act.	not include any amoun	t received that was a	\$0.00		
10.Income from all other sources in amount. Do not include any benefits payments received as a victim of a winternational or domestic terrorism. If page and put the total below.	received under the Soci ar crime, a crime against	ial Security Act or t humanity, or			
Total amounts from separate pages,	if any.		+\$0.00	+]=[
11. Calculate your total current more each	•	J	\$1,256.67	+	\$1,256.67
column. Then add the total for Col	umn A to the total for C	olumn B.			Total current
Part 2: Determine Whether the	Means Test Applies	to You			monthly income
12. Calculate your current monthly in					
12a. Copy your total current monthly			Сору	/ line 11 here →	\$1,256.67
Multiply by 12 (the number of r	months in a year).				X 12
12b. The result is your annual incom	e for this part of the for	n.		12b.	\$15,080.04
13 Calculate the median family incor	ne that applies to you	. Follow these steps:			
Fill in the state in which you live.		Illinois			
Fill in the number of people in your h	ousehold.	To the second se			
Fill in the median family income for yohousehold.	our state and size of			13.	\$50,133.00
To find a list of applicable median incinstructions for this form. This list ma	ome amounts, go onlin ay also be available at the	e using the link specifie e bankruptcy clerk's off	ed in the separate ice.		
14. How do the lines compare?					
14a. Line 12b is less than or equ	ual to line 13. On the top	o of page 1, check box	1, There is no presumption o	f abuse.	
14b. Line 12b is more than line Go to Part 3 and fill out For	13. On the top of page m 122A-2.	1, check box 2, The pre	esumption of abuse is determ	ined by Form 122A-2.	
Part 3: Sign Below					
By signing here, I declare under pen	alty of perjury that the ir	nformation on this state	ment and in any attachments	is true and correct.	
& 112 mm B	16	•			
Signature of Debtor 1	an AJ	_ *	Signature of Debtor 2		
Date 11/22/2016 MM/DD/YYYY			Date 11/22/2016 MM/DD/YYYY		
If you checked line 14a, do NOT to lf you checked line 14b, fill out Fo	ill out or file Form 122A rm 122A-2 and file it wi	-2. ith this form.			

CONSUMER PORTFOLIO SVC c/o Kimberley Rae Snyder PO Box 57071 Irvine , CA 92619

CAPITAL ONE p.o. box 3001 c/o shraddha bharatia Malvern , PA 19355

ATG CREDIT 1700 W CORTLAND ST STE 2 CHICAGO , IL 60622

NAVIENT SOLUTIONS INC 1002 ARTHUR DR LYNN HAVEN , FL 32444

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO , IL 60601

The Payday Loan Store Creditors Bankruptcy Service PO Box 800849
Dallas, TX 75380

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602

Sprint P O Box 629023 El Dorado Hills , CA 95762

Convergent Outsourcing, Inc. Po Box 9004 Renton , WA 98057

Express Clothing PO Box 182273 Columbus , OH 43218

TMobile P.O. Box 742596 Cincinnati , OH 45274 ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville , FL 32256

TCF - Corporate 1405 Xenium Ln N Ste 180 Minneapolis , MN 55441

SYNCB/OLD NAVY Po Box 530942 Atlanta , GA 30353